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Bib Data Sheet

CONFIRMATION NO. 2699

<b>SERIAL NUMBER</b> 10/812,336	<b>FILING OR 371(c) DATE</b> 03/29/2004 <b>RULE</b>	<b>CLASS</b> 356	<b>GROUP ART UNIT</b> 2886	<b>ATTORNEY DOCKET NO.</b> 11218-0006
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**APPLICANTS**

Russell C. Scaduto, Hummelstown, PA;

**\*\* CONTINUING DATA \*\*\*\*\*** I.A.

This appln claims benefit of 60/459,120 03/31/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** I.A.**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
06/19/2004**\*\* SMALL ENTITY \*\***

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> PA	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <u>[Signature]</u> Initials: <u>I.A.</u>				

**ADDRESS**

26587

**TITLE**

Sample chamber for microscopy

<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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